

**OCF Identification Number**

**GOVERNMENT OF THE DISTRICT OF COLUMBIA  
OFFICE OF CAMPAIGN FINANCE  
Honoraria and Outside Income Disclosure Statement**

**NOTICE**

The Mayor, and each member of the Council of the District of Columbia and of the Board of Education, are required by D.C. Official Code § 1-1108.1 (2001 Edition) to file this Honoraria and Outside Income Disclosure Statement annually, not later than May 15th of every calendar year in which they serve for the prior calendar year; within 90 days of the end of their service, if the filer ceases to serve prior to May 15th of any year; and within 30 days of any change in any information contained herein.

**ORIGINAL** ☐

**AMENDMENT** ☐

**CALENDAR YEAR**

NAME (Last) \_\_\_\_\_ (First) \_\_\_\_\_ (Middle) \_\_\_\_\_

Telephone (Home) \_\_\_\_\_ (Daytime) \_\_\_\_\_

Home Address \_\_\_\_\_

Business Address \_\_\_\_\_

**POSITION FOR WHICH FILING**

(Check Appropriate Box)

☐ Mayor    ☐ Council Chairman    ☐ Councilmember    ☐ Board of Education

**OUTSIDE INCOME AND ROYALTIES OTHER THAN HONORARIA**

- 1.(a) List the amount of outside income earned by category during the prior calendar year, if none, state none.**

Outside Income means any fixed payment at regular intervals for services rendered, self-employment, and royalties for any publication". The Mayor and the Chairman of the Council as well as members of their immediate family, are prohibited from receiving royalties in excess of \$10,000 in any calendar year. "Immediate family" means the public official's spouse and any parent, brother, sister, or child of the public official, and the spouse of any such parent, brother, sister, or child.

The Mayor and the Chairman of the Council must also list any royalty received by any member of their immediate family for the works of the Mayor or the Chairman. Any royalty or part of a royalty paid to a charitable organization by or on behalf of the Mayor or the Chairman of the Council for the works of the Mayor or the Chairman should not be calculated as part of the aggregate total.

**OUTSIDE INCOME****GROSS AMOUNT**

Fixed Payment

Self Employment

Royalties

**(b) List any charity to which any royalty was donated and amount, if none, state none.**

**NAME OF CHARITY**

**AMOUNT DONATED**

**DATE**

2. **Identify any client and the agency from whom you received outside income during the calendar year who transacted business with the District of Columbia Government, if none, state none.**

**CLIENT**

**D.C. GOVERNMENT AGENCY**

3. **Identify any client from whom you received outside income during the calendar year where the client stands to gain a direct financial benefit from legislation that was pending before the Council during the calendar year, if none, state none.**

**CLIENT**

**TITLE OF LEGISLATION**

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**HONORARIA**

1. **List each honorarium earned during the calendar year by the Mayor, members of the Council and Board of Education or any immediate members of their family including the payor, amount, services provided, and date.**

“Honorarium” means payment of money or anything of value for an appearance, speech, or article by the public official, except that there shall not be taken into account...any reimbursement for or payment of actual and necessary travel expenses incurred by the Mayor, the Chairman, a Councilmember or a Member of the Board of Education, or his her spouse. An honorarium shall be considered received in the year in which the right to receive the honorarium accrues”. Public Officials are prohibited from receiving honoraria exceeding \$10,000 in any calendar year. Any honorarium or part of an honorarium paid to a charitable organization by or on behalf of the public official shall not be calculated as part of the aggregate total.

Payor \_\_\_\_\_

Honorarium Amount (or anything or value) \_\_\_\_\_

Service Provided \_\_\_\_\_ Date \_\_\_\_\_

2. **List charity and the amount of honorarium if any, donated to charity, if none, state none.**

NAME OF CHARITY	AMOUNT DONATED	DATE
_____	_____	_____
_____	_____	_____

**VERIFICATION**

I swear (or affirm) that this Honoraria and Outside Income Disclosure Statement has been examined by me and to the best of knowledge and belief its true, correct and complete. I understand that the willful making of a false, misleading or incomplete statement can be grounds of civil and criminal prosecution.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_ Year

Notary Public

*Failure to file this form may result in a civil penalty of not more than \$50 for each day of noncompliance.*

Office of Campaign Finance  
Frank D. Reeves Municipal Building  
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